

Quarterly Totals

Demographic Reporting Form

Positive Alternatives

Date: April. 01, 2016 - June. 19, 2016

Grantee Name: Cradle of Hope

1. Client Age Range:

Under 15	15-17	18-19	20-24	25-29	30-34	35+	Unknown age
0	0	1	11	13	10	11	0

2. Client Pregnancy Status:

1st Trimester	2nd Trimester	3rd Trimester	Post-partum	Pregnancy Status Unknown
6	7	14	19	0

3. Client Marital Status:

Married	Not Married	Marital Status Unknown
9	35	2

4. Client Race:

Race: White	Race: African-American	Race: African-African	Race: American Indian	Race: Asian Pacific	Race: Other/ Multi Race	Race: Unknown
11	28	0	0	1	5	1

5. Client Ethnicity:

Hispanic Ethnicity: Yes	Hispanic Ethnicity: No	Ethnicity: Unknown
4	25	7